



# Returning to Work Safely:

Medically Validated  
Approaches to COVID-19



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## A LETTER FROM OUR CEO

Dear Friend,

Returning To Work during the current pandemic is a challenging process. New findings are constantly emerging. Official guidance is changing frequently. Reopening restrictions have been delayed or rolled back. With such elements in constant flux, HR teams like yours may need experienced advice for a successful and stable RTW.

As part of our goal to improve the health and wellbeing of employees across the country, we've put together guidelines for reopening, as written by our Eden Health board-certified team of physicians. These best practices are based not on speculation but on evidence-based observation of our own clients, treatment of our patients and research into state and local government protocols.

COVID-19 is one of the most complex problems the world has yet faced: there are no easy answers, and the most appropriate approaches are highly nuanced. Consequently, although our team of Medical Directors, clinicians and technologists pride themselves on simplifying a complex system for our customers and patients, our guidelines herein are detailed and intricate.

In this document, you'll find six major steps, each with multiple action items, to follow in reopening your workplace safely. We will discuss setting up a task force, deploying employee screening, reconfiguring your office, guiding employee behavior, vaccinating employees, and communicating with your workforce. We hope you find these six essential steps useful in keeping your business productive and your population healthy.

With our COVID-19 Active Daily Monitoring solution accelerating to reach thousands of employees per workday, we have been honored to help so many organizations navigate this difficult period and hope this guide will be helpful to yours.

Wishing you and your loved ones good health,

**Matt McCambridge**  
CEO, Eden Health

If you have questions or comments, we welcome them. And if we can be helpful as your workplace reopens, please reach out. You can contact our team at [covidprotocols@edenhealth.com](mailto:covidprotocols@edenhealth.com)

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# INTRODUCTION

We are all eager to get back to work. Since the timeline for resolution of the pandemic is unknown, it will require long-term changes to our workplace and methods of working. While physical isolation is effective at preventing COVID-19 transmission, every situation is different, and that strategy alone will likely not suffice for your workplace. Around the world, employers are beginning to implement policies and procedures to safely have their employees return to work while preventing further transmission of COVID-19.

Eden Health has put together these protocols to help you create standard operating procedures for your workplace. In this guide written by our medical staff, we'll detail best practices that can help you and your employees reduce risks and stay safe. Even so, we should note that this document is not medical advice, and, as the world has seen throughout the pandemic, best practices have been rapidly evolving as new evidence emerges.

The protocols we've included here are often stricter than federal, state and local guidelines, but even that may change as the situation evolves. We advise organizations first and foremost to adhere to all local, state and national laws and guidelines, and to take additional precautions where appropriate.

We advise organizations first and foremost to adhere to all local, state and national laws and guidelines, and to take additional precautions where appropriate.

To decrease the spread of COVID-19 in the workplace, employers must seek ways to prevent and reduce transmission among employees in order to maintain a healthy work environment and healthy business operations. Employers should implement (and continue to update) a plan that is specific to their workplace. Such a plan should identify areas and tasks that may expose employees to COVID-19 and should seek to eliminate or reduce such exposures.

At Eden Health, we recognize that we all need to work together in order to defeat COVID-19. We hope these protocols are of use to your business moving forward.

**STEP 1:**

# **Create a COVID-19 Task Force**

**To begin with, your company will need a team of experts who can create sound strategies and implement them quickly. To that end we recommend assembling a COVID-19 task force to plan and coordinate your company's response to the varying state of the pandemic.**

### **Creating a task force**

In addition to preparing your company to deal with a range of outcomes, the creation of a COVID-19 task force may help to establish decision-makers and reinforce internal knowledge sharing. We suggest you seek out a cross-functional, diverse group of employees of all backgrounds and status, as they will provide insight into company culture and help you execute your strategies with clarity and compassion.

### **How your task force should function**

- **Meet at varying frequencies**, from twice a week to daily, depending on your business needs.
- **Figure out the best processes** to provide employee safety and business continuity.
- **Listen to** and voice the concerns of employees, customers and other stakeholders.

### **What your task force is responsible for**

- **Staying up to date** and communicating COVID-19 related policies regularly and clearly.
- **Consulting with medical experts** and sharing expert information to provide clarity, reduce anxiety, and avoid misinformation.
- **Adapting and testing** IT infrastructure and communications approach to enable productive work onsite and remotely.
- **Considering the impact** of closure of schools and other facilities that may require employees to work remotely.
- **Providing clear policies** for business-related travel and conference attendance.
- **Finding ways to contribute** to community efforts in virus containment and care.

Seek out a cross-functional, diverse group of employees of all backgrounds and status, as they will provide insight into company culture.



STEP 2:

Create Screening  
& Active Monitoring  
Protocols For Employees



**With your task force now in place, it's time to start monitoring the current health status of your workforce for COVID-19 risks and symptoms. The following steps should be undertaken to ensure the continued health of your employee population.**

### **Set Up an Active Monitoring & Screening Protocol**

All employees should be actively monitored on a daily basis to ensure that risks are evaluated, flagged, and mitigated as quickly as possible. Self-monitoring allows employees to self-administer crucial tests prior to their arrival at work each day.

#### **Education**

- **The employer should** share best practices for preventive measures in minimizing exposure via detailed resources.
- **Employees should** have access to a healthcare provider or resource to answer questions about COVID-19 and concerns related to risk and possible community exposures.

#### **Temperature verification**

- **Each employee should** be given an oral thermometer to use at home. Taking temperatures at home reduces the risk of having a sick patient on site, which increases the chance of spread. Elevated temperature is present in 80% of symptomatic patients which is why it's a good early indicator for active COVID-19 infection.
- **Where possible, employees should** provide means of verifying their temperature, such as sharing a photo of the result electronically with clinicians.
- **Make sure** there is communication and education around how to properly take a temperature.
  - **Avoid a hot/cold shower** 30 minutes prior to taking your temperature.
  - **Nothing hot or cold to drink** 30 minutes prior to taking your temperature.

## Exposure risk and symptom screening

Each employee should complete an electronic screener that evaluates risks with the following questions:

### In the past 14 days, have any of the following applied:

1. Have you had a fever of 100.4° F (38° C) or higher?
2. Have you experienced symptoms such as:
  - Cough or difficulty breathing
  - Fatigue
  - Chills or body aches
  - Headache
  - New loss of smell or taste
  - Congestion or sore throat
  - Nausea or vomiting
  - Diarrhea
3. Have you knowingly had close contact with someone who tested positive for COVID-19 or who has new symptoms of COVID-19? (Close contact means direct contact with infectious secretions (e.g. being coughed on) or being within six feet (2 meters) for at least 15 minutes.)
4. Have you tested positive for COVID-19? (This does not include COVID-19 antibody testing).
5. Have you been in a situation where you were unable to, or did not practice, social distancing recommendations? (For example, being indoors or in enclosed spaces and within six feet of other persons without masks on.)

Any affirmative answer should prompt further investigation conducted by virtual visit or phone call with a medical professional. The clinician will discuss the employee's answers and determine appropriate next steps, including whether or not the employee should report to work.

## Mental health support and screening

Everyone reacts differently to stressful situations. For many, COVID-19 has dramatically increased the level of stress, not only at work but in all aspects of life. How employees respond to stress during the COVID-19 pandemic can depend on their background, their social support from family or friends, their financial situation, their health and emotional background, the community they live in, and many other factors. The changes resulting from the COVID-19 pandemic and the ways we try to contain the spread of the virus can affect anyone.

- **Employers should** actively encourage employees to seek support for mental health concerns.
- **Employees should** have access to licensed therapists via video visits.
- **Ideally, employees who self-identify** are given access to a clinical team which should periodically assess employees' mental health via screenings such as the Generalized Anxiety Disorder 7 (GAD-7) scale, a clinically validated assessment of anxiety.

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**Review this CDC website to find resources and information around mental health and tips on coping with stress.**



## Identify and isolate suspected cases

In workplaces where exposure to COVID-19 may occur, prompt identification and isolation of potentially infectious individuals is a critical first step in protecting workers, visitors, and others at the work site.

If an employee starts to develop symptoms consistent with COVID-19 while physically located in the workplace, in most cases you do not need to shut down your facility.

- Prior to the employee leaving, identify people and areas this person was in. This will help guide cleaning and disinfecting measures as well as quarantine recommendations.
- Those identified employees that meet the CDC criteria for Close Contact, with or without proper use of masks, should immediately leave the premises and quarantine for 10 days if they do not receive a COVID-19 test. Employees should quarantine for 7 days if they are tested for COVID-19. If they receive a negative test result on day 5 or later, self-quarantining is no longer required.
- Close off any areas used for prolonged periods of time by the suspected person. If possible, wait 24 hours before cleaning and disinfecting to minimize exposure to other employees. (Note: it is best to properly wear additional PPE if you are disinfecting and cleaning in an area where a known or suspected case has spent a significant amount of time.)
- Employers should provide education and resources to employees on what to do when they are not feeling well.
- Testing may or may not be recommended based on the scenario. Have the employee reach out remotely (e.g., via an online “virtual visit”) to a healthcare professional to assess the need for COVID-19 testing.

If an employee tests positive for COVID-19, employers should inform fellow employees of their possible exposure but maintain confidentiality as required by the Americans with Disabilities Act (ADA).

- Employees should not return to work until they have met the criteria to discontinue home isolation (discussed below) and have consulted with a healthcare provider.
- Before an employee returns to work, consider implementing a **Clearance for Work** document. This document formally clears a known or suspected COVID-19 case to return to the office based on the advice of a medical professional.

## For symptomatic workers with confirmed COVID-19 who are returning to work:

### SYMPTOM-BASED STRATEGY

#### Exclude from work until:

- For most persons with COVID-19 illness, isolation and precautions can generally be discontinued **10 days** after symptom onset and resolution of fever for at least 24 hours, without the use of fever-reducing medications, and with improvement of other symptoms.

## For asymptomatic workers with confirmed COVID-19 who are returning to work:

### TIME-BASED STRATEGY

#### Exclude from work until:

- 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test. If they develop symptoms, then the symptom-based strategy (above) should be used.
- For persons who never develop symptoms, the date of first positive RT-PCR test for SARS-CoV-2 RNA should be used in place of the date of symptom onset.

#### Role of PCR testing after discontinuation of isolation or precautions:

- For persons who never develop symptoms, isolation and other precautions can be discontinued 10 days after the date of their first positive RT-PCR test for SARS-CoV-2 RNA.

All employees should be actively monitored on a daily basis to ensure that risks are evaluated, flagged, and mitigated as quickly as possible.



STEP 3:

# Assess Risk & Create Workplace Protocols

**The next crucial step in reopening your business involves the reconfiguration of your office layout as appropriate and implementation of new cleaning and hygiene protocols. This will take some time and may be disorienting for returning employees. Consider creating a virtual guided tour video to post online before they return to increase familiarity and comfort with the new routines.**

Observe federal, state and local guidelines and review any protocols specific to your workplace location.

Before you start building the specific protocols to govern your workplace, first review federal, state, and local Return To Work guidelines. Also review any protocols that may be specific to your workplace location.

**Federal regulations and guidelines to consider are:**

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**[OSHA – Guidance on Returning To Work](#)** >

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**[CDC – Guidance for Businesses and Employers Responding to COVID-19](#)** >

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**[Opening Up America Again](#)** >

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Go to your state, county, and city government websites to understand the mandates and best practices for workplace based guidelines.

Some guidance is mandatory and some is recommended. Keep in mind that you may have to observe multiple guidelines that conflict if you have a scattered workforce. Some states have certain mandates that are expected to be met before reopening. These may include:

- Documented safety plans
- Screening (such as temperature)
- Masks
- Employee Training

The protocols we've included here are often stricter than federal, state, and local guidelines, but that is not always the case. Make sure to review federal, state, and local protocols and incorporate them into the overall protocols/guidelines you create for your employees.



## Assess Exposure Risk To Your Employees

Assess the potential risks in your workplace around exposure to COVID-19, then build protocols accordingly.

### Assess exposure risk for each department of your organization.

Establishing a risk assessment will help guide protocols around testing cadence and peer-to-peer exposure risk. Departments should be assigned one of the following three categories:

## A. LOWER EXPOSURE RISK

**Jobs requiring little or no contact with people who may or may not be infected with COVID-19, including the public and other coworkers. For example:**

- Remote workers (i.e., those working from home during the pandemic).
- Office workers with little coworker or public contact.
- Manufacturing and industrial facility workers with little coworker or public contact.
- Healthcare workers providing only telemedicine services.
- Long-distance truck drivers.

## B. MEDIUM EXPOSURE RISK

**Jobs requiring frequent/close contact with people who may or may not be infected with COVID-19. For example:**

- Those in contact with travelers who return from international locations with widespread COVID-19 transmission.
- Those in contact with the general public (e.g., in schools, high population density work environments, and some high-volume retail settings).

## C. HIGH EXPOSURE RISK

**Jobs with a high potential for exposure to known or suspected sources of COVID-19. Workers in this category include:**

- Healthcare delivery and support staff exposed to possible COVID-19 patients.
- Medical transport drivers moving possible COVID-19 patients.
- Mortuary workers dealing with victims of COVID-19.

## Identify where and how workers might be exposed

Identify work and common areas where employees might have close contact with others (within six feet). These could be meeting rooms, break rooms, the cafeteria, locker rooms, check-in areas, waiting areas, or routes of entry and exit.

Consider all employees that have responsibilities in and contact with many different areas of the workplace; for example, janitorial staff or maintenance staff.

## Evaluate workplace design and build protocols around interactions to reduce the risks.

### Determine high traffic areas of the office and reduce exposure

- **Identify and reduce** the number of high-touch surfaces (doorknobs, elevator buttons).
- **Consider installing** automatic doors and keycard or ID badge triggered elevators, allowing people to come and go hands free (recommended by AIOF, the Commercial Real Estate Development Association).
- **Consider establishing** one-way traffic routes for your employees to move through the office. This can potentially avoid any close interaction between employees.

### Use independent risk assessments in each area of the building

- **Use of masks** and other personal protective equipment (PPE) is important, but “one size fits all” PPE usage and temperature scan policies will not be effective.
- **Instead, assess the risk profile** based on the level of interaction with building staff tenants throughout the day among the range of high traffic or low-traffic areas.
- **For example, people working independently** in their own office don’t necessarily need to wear masks all day. Meanwhile, a person who frequently interfaces with others in common spaces, such as lounges, should wear a mask at all times.

## De-densify your workplace

Use methods to physically separate employees in all areas of the building, including work areas, meeting and break rooms, parking lots, entrances and exits, and locker rooms.

- **Launch a policy** to prevent employees from gathering while waiting for screening. Keep a six-foot separation between employees. Use signs, tape marks, or colored tape on the floor, placed six feet apart, to show where to stand.
- **Stagger shifts**, start times, and break times as feasible.
- **Replace high touch communal items**, such as coffee pots and bulk snacks with pre-packaged, single-serving items. Encourage staff to bring their own water. Install no-touch activation methods for water fountains.
- **Modify or adjust seats**, furniture, and workstations to maintain social distancing of six feet between employees. Arrange chairs in communal seating areas by turning, covering, spacing, or removing chairs to maintain social distancing.
- **Install transparent shields** or other physical barriers where possible to separate employees and visitors.
- **Encourage the use of outdoor seating areas** and social distancing for any small-group activities such as lunches, breaks, and meetings.

## Streamline visitor management

Workplaces who have contractors, delivery personnel and suppliers that are essential are challenged to protect them and also protect the other essential onsite employees.

- **Conduct a daily screening questionnaire** before the visitor arrives onsite. This should mimic the daily questionnaire and screening your employees will be completing daily.
- **Have a printed COVID-19 “passport”** that the visitor is able to show for approval.
- **Minimize areas of contact**, especially physical contact. All physical contact surfaces will need to be disinfected after every use.
- **Consider an invitation-only** protocol for visitors.

## Overcommunicate visually

- **Generously post signs** and reminders providing instructions on hygiene, COVID-19 symptoms, and cough and sneeze etiquette.
- **Make sure to include signs** for non-English speakers too.
- **In your building or suite's entryway**, install floor tape and other visual cues to explain how to navigate your lobby and other common areas.

## Inspect and Evaluate Ventilation, Cleaning and Disinfecting Systems

- **Check your ventilation.** If you have demand-control ventilation controls that reduce air supply based on temperature or occupancy, disable them. Ongoing air quality monitoring is a must, but also consider upgrading your air filtration systems with MERV-13 and bipolar ionization solutions. Portable high-efficiency particulate air (HEPA) filtering fans should be used in all shared facilities, especially in the restrooms.
- **Inspect other core building systems.** Especially if your building has been closed for any length of time, inspect the physical condition of mechanical systems, plumbing, potable water, fire prevention systems, and drains. Shutdowns or reduced water usage can lead to mold and Legionella, the origin of Legionnaires' disease.
- **Develop stricter daily cleaning procedures.** Use [EPA-approved disinfectants](#) to clean high-touch surfaces like elevator buttons, registration desks, workstations, keyboards, telephones, handrails, printer/copiers, drinking fountains, and doorknobs.
- **Close off potentially contaminated areas to disinfect.** If someone who is sick recently visited your building, close off all areas used by the person who was sick, wait 24 hours, then begin a thorough disinfection process.

Make sure to review federal, state, and local protocols and incorporate them into the overall protocols/guidelines you create for your employees.



STEP 4:

Establish Codes  
of Conduct & Best  
Practices for Employees  
to Follow

**The next step in reopening your business is more psychological than physical, requiring a change in company culture. Employees must begin to take seriously the notion of caring not only for themselves but also for others. Sowing the seeds of compassion within a workforce is not an easy task, but it is an important one.**

### **Draft a social contract with employees**

Your employee population is compelled by the pandemic to obey a new social contract as it goes back to work. The same way we expect our fellow humans to obey traffic laws, we need to create a universal understanding and respect for the idea of abiding by new social rules.

Consider drafting a literal “social contract” statement for employees detailing expectations towards employees’ respect and concern for each others’ health and wellbeing. If deemed appropriate within your company culture, you may even wish to ask employees to sign such a document to underscore the gravity of the commitment being asked.

### **Personal protective equipment considerations**

Currently, cloth masks are recommended for those that do not work in the healthcare field.

SARS-CoV-2 spreads from person to person through respiratory droplets produced when a person coughs, sneezes, or even talks. Depending on the size of these droplets, they can float in the air and land in another person’s nose, mouth or eyes. To reduce the spread of COVID-19, CDC recommends that people wear cloth face coverings in public settings when around people outside of their household. These not only prevent people from spreading the infection, but it can reduce the risk and severity of infection for the wearer.

# 1

## **Wear your face covering correctly.**

- Wash your hands before putting on your face covering.
- Put it over your nose and mouth and secure it under your chin.
- Try to fit it snugly against the sides of your face.
- Make sure you can breathe easily.

# 2

## **Follow everyday health habits.**

- Stay at least six feet away from others.
- Avoid contact with people who are sick.
- Wash your hands often, with soap and water, for at least 20 seconds each time.
- Use hand sanitizer if soap and water are not available.

# 3

## **Take off your face covering carefully when you're at home.**

- Untie the strings behind your head or stretch the ear loops.
- Handle only by the ear loops or ties.
- Fold outside corners together.
- Place covering in the washing machine.
- Be careful not to touch your eyes, nose, and mouth when removing and wash hands immediately after removing.

# 4

## **Masks should be required for all workers at all times inside the workplace.**

- When disposable gloves are used, workers should typically use a single pair of nitrile exam gloves. Change gloves if they become torn or visibly contaminated.

# 5

## **After removing PPE, always wash hands with soap and water for at least 20 seconds.**

# 6

## **Additional PPE such as gowns, face shields, gloves, are not recommended for workers in the lower exposure risk group.**



**Wear your face covering.**

**Stay at least six feet away  
from others.**

**Avoid contact with people  
who are sick.**

**Wash your hands often, with  
soap and water, for at least 20  
seconds each time.**



STEP 5:

# Implement a Vaccine Roll-Out Plan

**In addition to masks and social distancing, widespread and equitable vaccine distribution will be critical to fighting the transmission of COVID-19. Public health experts will rely on employers across the country to help implement adherence to the vaccine by creating a **vaccination plan** for their employees before returning to an office setting.**

Of course, each workplace is different. It's important to keep in mind that there is no one-size-fits-all vaccination approach to each employee in your organization. Should you decide to enforce any type of vaccination policy at your workplace, there are **important exceptions** to keep in mind, including those employees who may be members of an at-risk population, who may have a religious exemption, or who may be pregnant or planning to become pregnant.

By using the context of flu vaccines as a roadmap for how businesses may handle vaccination for COVID-19, we can anticipate that employers will be subject to the Americans with Disabilities Act of 1990 (ADA) and generally must provide reasonable accommodations to employees with disabilities that prevent them from receiving a vaccine.

According to the [Equal Employment Opportunity Commission \(EEOC\)](#), employees can be barred from the workplace if they don't comply with a vaccination mandate. While the ADA limits employers' ability to request medical testing that reveals information about an employee's physical or mental health, the administration of a COVID-19 vaccination does not meet the same threshold.

Employers are also subject to [Title VII of the Civil Rights Act of 1964](#) and must reasonably accommodate employees who notify them of sincerely held religious beliefs that prevent them from receiving a vaccine. That said, under the ADA, employers may request information from the employee requesting such an accommodation, including information about their specific limitation or disability. An employer may also require any employee seeking accommodation to provide documentation from their medical provider to confirm their limitation or disability.

Employees who are pregnant, breastfeeding, or are planning to become pregnant are operating with [limited information](#) regarding the COVID-19 vaccine. Ultimately, it is up to each employee's discretion as to whether or not they choose to receive the vaccine while pregnant or planning to become pregnant.

If you choose to deploy any kind of vaccination plan, you should have a strategy in place that encourages your employees to receive the vaccine when they're eligible. This may look like offering a financial incentive for getting vaccinated or by giving them the full day off of work for vaccination days. Since known side effects of the vaccine prompt immune responses that may result in fever, body aches, general fatigue, and more, it may be comforting for employees to know that they are guaranteed paid sick leave should they feel ill after receiving the vaccine.

Eden Health is committed to working with employers to facilitate their back-to-work plans. From facilitating vaccine scheduling to crafting a communication strategy for your employees, we want to ensure you have the resources you need to build a healthier workforce.

# COVID-19 VACCINE Q&A

## **What is Emergency Use Authorization?**

Emergency Use Authorizations, or EUAs, enable the FDA to make unapproved products available to the public during declared health emergencies. In the midst of an emergency, like a pandemic, it may not be feasible to collect all of the efficacy and safety evidence typically required by the FDA to approve a drug or treatment. Consequently, they can decide if there is enough support to show that patients will still significantly benefit from having access to the product in question.

## **What's the difference between granting full approval of licensure and granting an EUA?**

The requirements for a full approval demand more criteria than for an EUA; the product would need to have a proven benefit as opposed to a likely benefit with an EUA. Moreover, EUAs expire when the declared emergency ends, unlike a full approval. What does this mean in terms of COVID-19 vaccines? Given that the vaccine would be administered to millions of people who are both healthy and have preexisting conditions, evidence needs to show that the risk of complications are exceptionally low for both an EUA and full approval. Therefore, the safety benchmark for a vaccine is much higher than a typical drug being considered for an EUA or full FDA approval.

## **What conditions are needed for a COVID-19 vaccine to receive an EUA?**

The FDA has published [guidelines](#) that outline the requirements needed for an EUA. First, the vaccine must be at least 50% effective, meaning that it reduces the infection by 50% in those who are vaccinated. Second, the medical company must show at least two months of follow-up data illustrating its safety.

In order to qualify for an EUA, the overall benefits must outweigh the potential risks. Before making a final decision, the FDA has said that they will meet with a separate advisory committee to review all of the information objectively.

**If my employees are young, healthy, and not at risk for COVID-19, why would they need a vaccine if they'd probably recover from the virus?**

The danger of getting sick with COVID-19 far outweighs the risks of getting the vaccine; vaccination is safe, and it will prevent you from developing symptoms and experiencing serious complications caused by the virus. Although it is rarer for young, healthy individuals to die from COVID-19, no one can guarantee how your body will respond to the virus. Moreover, younger populations who have been infected with COVID-19 have reported [chronic issues](#), and you may be unaware of certain underlying conditions that may complicate your recovery.

Healthy individuals also make up a large portion of the population, so if all healthy individuals abstain from getting vaccinated, we will never reach [herd immunity](#) and end the pandemic. Studies are also being conducted to see if these vaccines will prevent the spread of COVID-19 in addition to the onset of disease, which would provide evidence that the vaccine not only protects you, but also your loved ones.

**Can my employees get COVID-19 from the vaccines?**

No. Pfizer and Moderna use non-infectious genetic material, called messenger RNA, which cannot cause a COVID-19 infection.

**Will the vaccines cure coronavirus in those already infected?**

No. As with most vaccines, a COVID-19 vaccine will only help prevent symptom development in people who are exposed to the virus. However, other medicines are being tested and developed to treat patients currently infected with COVID-19.

**If an employee notices COVID-19 symptoms after getting vaccinated, should they isolate?**

Yes. Because it takes a few weeks to build up immunity after receiving the vaccines, it is possible to become infected with COVID-19 right before (or after) vaccination. This could happen because you have not had both doses of the vaccine or the vaccine has not had sufficient time in your body to provide protection. If this occurs, you should contact your medical provider, explain your symptoms, and isolate accordingly.

### **Would employees who have recovered from COVID-19 still benefit from getting the vaccines?**

Yes. It seems the natural immunity that occurs after you recover from the virus is not as strong as the immunity you develop after getting the Pfizer or Moderna vaccine. Immunity levels appear to differ in people who were infected with the virus. For people who were mildly ill with the novel coronavirus, their immunity may diminish after a few months. For others, it may last longer. With a vaccine, we can control the dosage and guarantee that it will elicit an optimal immune response – a variable you cannot control in a natural infection.

### **Now that vaccines are available, do we still need to wear masks and socially distance?**

Yes, these measures are still necessary to slow the spread of COVID-19, especially now. It will take months before the vaccines are widely available, and we will need to take extra precautions until everyone can get vaccinated.

It's also unknown whether vaccinated individuals are less likely to transmit the virus. If these people can unknowingly spread COVID-19, masks and social distancing will continue to be critical tools in protecting others. Additionally, [active monitoring of symptoms and exposures](#) and accessible COVID-19 testing are still important for mitigating the spread of the virus.

STEP 6:

Create a  
Communication  
Plan



**Once all the above protocols are in place, it's important to tell your workforce that they have been implemented. This provides not only valuable information for employee compliance but crucial peace of mind.**

### **Elements of your communication plan**

One of the greatest challenges of this pandemic is that so many aspects of the virus are still unknown. Rumors tend to grow in the absence of reliable information, so clear communication and transparency are vital right now. Create a communication plan that includes the following steps:

- **Develop processes** to reach all employees with important updates.
- **Constantly reinforce** work-from-home and travel guidelines, as well as mental, physical and financial resources that are available.
- **Take this opportunity** to build trust with employees.
- **Consider communicating** using non-traditional methods. Email works, but consider all media at your disposal, including text outreach, voicemails, and even LinkedIn posts about your task force initiatives (this may also support local businesses).
- **Remember that there is no such thing as overcommunication** at this moment. Reassure your employees often that there is a plan in place with specific guidelines to govern returning to work.
- **Send messages** as often as possible so that your employees feel confident in the plan you've put in place to get them back to work, safely.

Rumors tend to grow in the absence of reliable information, so clear communication and transparency are vital right now.



# KEY TERMS

## Key Terms/Definitions for COVID-19 Return To Work:

**Active monitoring** refers to a medical provider that assumes responsibility for establishing regular communication with potentially exposed people to assess for symptoms consistent with COVID-19 and for potential risk.

**Herd Immunity** is when most of a population is immune to COVID-19 either based on previous infection or vaccination. This provides indirect protection to those who are not immune to the disease.

**R<sub>0</sub>** is a value that represents the average number of people infected by one infectious individual. **R<sub>0</sub>** is not a fixed number. A higher **R<sub>0</sub>** means more people will be infected over the course of the outbreak.

A **super spreader** is a term that refers to someone that will disproportionately infect a large number of people with a virus. It is believed that super spreaders, which is thought to be 10% of the population lead to 80% of the spread.

**Asymptomatic transmission** refers to transmission of the virus from a person who does not develop symptoms.

**Pre-symptomatic transmission** is when transmission occurs prior to symptom onset. These people do become symptomatic.

**Paucisymptomatic** refers to symptoms that are extremely mild and tend to go unrecognized or unnoticed.

## KEY TERMS

**Mitigation** is the effort to reduce loss of life and property by lessening the impact of COVID-19. Effective mitigation requires that we all understand risks, address the hard choices, and invest in long-term community well-being. Without mitigation actions, we jeopardize our safety, financial security and self-reliance.

A **COVID Screening Questionnaire** is a series of questions asked to determine a person's risk for COVID-19. They include questions about symptoms, travel history in recent weeks, and exposure to someone who has been confirmed to have COVID-19.

A **confirmed case** is an individual with laboratory-confirmed positive test for COVID-19.

A **self-quarantine** is a strategy to restrict the activities and movement of a person who has been exposed to the virus but has not necessarily tested positive. A self-quarantine should be 14 days long, as recommended by the CDC. Activities outside the home should be restricted, except to seek medical attention, in which case people should avoid using public transportation. In the event that someone cannot avoid roommates or family, people under self-quarantine should use their own bedroom, wear a face mask, and not share bedding, towels, or dishes.

**Self-isolation** refers to separating those with symptoms from those who are not sick.

**Close Contact** refers to direct contact with respiratory droplets from a confirmed case (e.g., being coughed on) or proximity within approximately six feet (2 meters) of a confirmed case for a prolonged period of time (10-15 minutes), such as attending a conference or sharing a workspace with a confirmed case. Note: this contact time is cumulative, so if you are around a person for five 3 minute intervals within a 24 hour period, that adds up to 15 minutes of close contact.

## HELPFUL LINKS

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**Confirmed cases** by country and by city/county



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**CDC** - Guidance for Businesses and Employers  
Responding to COVID-19



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**WHO** - Guidance For Employers & Workers



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**OSHA** - Guidance on Returning To Work



# FAQS

## **Can we ask an employee to stay home or leave work if they exhibit symptoms of the COVID-19 coronavirus or the flu?**

Yes, you are permitted to ask them to seek medical attention and get tested for COVID-19. The CDC states that employees who exhibit symptoms of influenza-like illness at work during a pandemic should leave the workplace. The Equal Employment Opportunity Commission (EEOC) confirmed that advising workers to go home is permissible and not considered disability-related if the symptoms present are akin to the COVID-19 coronavirus or the flu.

## **An employee of ours has tested positive for COVID-19. What should we do?**

The infected employee should be sent home until released by their medical provider or local health provider. You should send home all employees who worked closely with that employee to ensure the infection does not spread. Before the infected employee departs, ask them to identify all individuals who worked within six feet for a prolonged period of time (10 minutes or more) during the 48-hour period before the onset of symptoms. When sending the employees home, do not identify by name the infected employee or you could risk a violation of confidentiality laws. If you work in a shared office building or area, you should inform building management so they can take additional precautions.

## **If we learn or suspect that one of our employees has COVID-19, do we have a responsibility to report this information to the CDC?**

There is no obligation to report a suspected or confirmed case of COVID-19 to the CDC. The healthcare provider that receives the confirmation of a positive test result is a mandatory reporter who will handle that responsibility.

## **We are hiring employees during the outbreak; what steps can we take to protect our workforce?**

The EEOC has confirmed that you may screen applicants for symptoms of the COVID-19 coronavirus after you make a conditional job offer, as long as you do so for all entering employees in the same type of job. You can also take an applicant's temperature as part of a post-offer, pre-employment medical exam after you have made a conditional offer of employment.

## **What is the risk of reinfection once an employee has been diagnosed with COVID-19?**

According to the CDC, cases of reinfection have been reported, but remain rare. Ongoing COVID-19 studies will help us understand how likely reinfection is, how often it occurs, and how soon after the first infection reinfection can take place. The best way to prevent infection, and to guard against reinfection, is to maintain social distancing and to wear a mask when around others.

# ABOUT EDEN HEALTH

## Eden Health is an integrated medical provider that works with employers across the country.

Our collaborative care model allows us to deliver vastly better care to employees at a lower overall cost to the system. We combine primary care, behavioral health, PT, specialist referrals, and benefits navigation.

It all starts virtually, with an easy-to-use chat and video app, and extends to in-person consultations and in-office with pop up clinics. No matter the method, a patient will see the same care team, so the patient-provider relationship is consistently maintained.

This integrated approach has a valuable side-benefit of alleviating many of the healthcare headaches that face HR departments today, while maintaining a patient satisfaction score of 4.95 out of 5 or higher.



Eden Health also offers the best-in-class corporate COVID-19 solution. Since March 2020, the earliest days of the pandemic, our Active Daily Monitoring service has been protecting essential employees in workplaces. It combines an app-based questionnaire and temperature checks to screen employees before they arrive at the office. A clinician will proactively reach out within a few minutes to anyone who might need care.

To learn more, visit [edenhealth.com](https://edenhealth.com)



# COVID-19 EMPLOYEE SELF-CERTIFICATION TO RETURN TO WORK

I, \_\_\_\_\_ attest to the following:

I have had no fever for at least 24 hours, and have not taken medication to reduce fever during that time.

Date fever and/or symptoms began: \_\_\_\_\_

Date positive test was taken: \_\_\_\_\_

Date of last fever of 100.4 degrees or higher: \_\_\_\_\_

## **For those who are symptomatic or had a positive test,**

- At least 10 days have passed since symptoms first appeared **and**
- At least 24 hours have passed since last fever without the use of fever-reducing medications and symptoms (e.g., cough, shortness of breath) have improved

## **In the last 14 days,**

- I have not knowingly been in close contact with anyone with known or suspected COVID-19.
- I have not traveled outside the U.S. or to areas in the U.S. considered high risk.
- My symptoms have improved.

Employee name: \_\_\_\_\_

Employee signature: \_\_\_\_\_

Medical Provider's name: \_\_\_\_\_

Medical Provider's signature: \_\_\_\_\_

NPI: \_\_\_\_\_

Today's date: \_\_\_\_\_

Date returned to work: \_\_\_\_\_

Eden Health works with employers to provide integrated health care for their employees. Our services include COVID-19 screening and testing, combined with immediate, proactive care from medical staff.

Learn more at  
[edenhealth.com](https://edenhealth.com)

# edenhealth

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